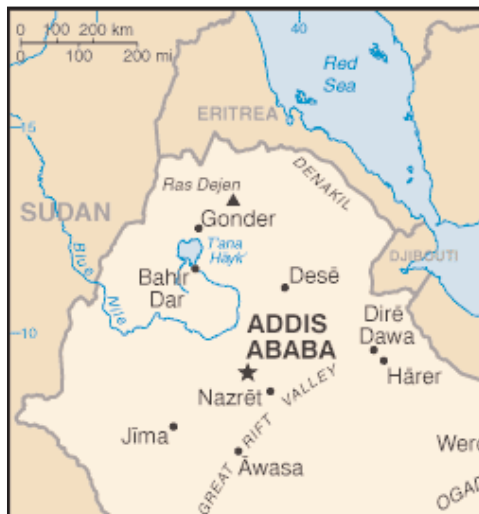


Country Profile | President's Malaria Initiative (PMI)

ETHIOPIA

February 2007



At a Glance: Malaria in Ethiopia

Population: 74.8 million¹

Life expectancy at birth: 48 years (male),
50 years (female)¹

Population at risk of malaria: 68%²

Reported malaria cases (2003):
Over 500,000 cases*²

Under-5 mortality rate: 171/1000, or
approximately 1 in 6 children³

Estimated annual malaria deaths
in children under 5: 29,100⁴

* Actual numbers of malaria cases are considered
to be much higher since the majority of cases
in Africa are unreported.

¹ CIA World Fact Book

² Roll Back Malaria 2005 World Malaria Report

³ UNICEF

⁴ WHO/AFRO, WHO CHERG (2000)

Background

Malaria is a leading health issue in Ethiopia, where an estimated 48 million (68 percent of the population) live in areas at risk of malaria. Malaria transmission in Ethiopia is unstable and is characterized by frequent and often large-scale epidemics.

Ethiopia* is one of eight new third-round target countries benefiting from the President's Malaria Initiative (PMI), a five-year, \$1.2 billion program led by the U.S. Agency for International Development (USAID), in conjunction with the Department of Health and Human Services (Centers for Disease Control and Prevention), the Department of State, and the White House.

Goal

The goal of PMI is to cut malaria deaths by 50 percent in 15 countries in Africa by reaching 85 percent of the most vulnerable groups – principally pregnant women and children under 5 years of age – with lifesaving services, supplies, and medicines.

PMI coordinates with national malaria control programs and international partners, including the World Health Organization; the Global Fund to Fight AIDS, Tuberculosis and Malaria; the World Bank Malaria Booster Program; the Roll Back Malaria partnership; the Bill and Melinda Gates Foundation; nongovernmental organizations, including faith-based and community groups; and the private sector.

Key Interventions

In support of Ethiopia's national malaria control program, PMI backs four key intervention strategies to prevent and treat malaria:

- Spraying with insecticides ("indoor residual spraying," or IRS)
- Insecticide-treated mosquito nets (ITNs)
- Lifesaving drugs
- Treatment for pregnant women ("intermittent preventive treatment," or IPT)

Preliminary Activities to Date

- CDC and USAID plan to conduct a comprehensive malaria assessment in spring 2007.

* One high-burden province